



Supplemental Information for

Day Care

Complete this supplement in its entirety and submit with the completed Use Permit application form to the address below:

City of Hampton
Community Development Department, Planning Division
22 Lincoln Street, 5th Floor
Hampton, Virginia 23669

OFFICE USE ONLY
Date Received:

Case Number: UP _____ - _____

1. LOT INFORMATION

Lot Width _____ Lot Depth _____ Total Lot Area (ac. or sq. ft.) _____

Area to be Fenced (ac. or sq. ft.) _____ Fence Height _____ Fence Type _____

Area of Outdoor Play Area (ac. or sq. ft. – if different from area to be fenced above) _____

Current Number of On-site Parking Spaces _____ Proposed Number of On-site Parking Spaces _____

☐ Please attach a sketch showing the parking area and the circulation to, from and within the parking lot

2. BUILDING INFORMATION

Square Footage _____ Stories _____ Number of Classrooms _____

Number of Offices _____ Number of Kitchens _____ Number of Toilets _____

Number of Washbasins _____ Area of Indoor Play Area (sq. ft.) _____

Is this currently an occupied residence? ☐ Yes ☐ No Will this be an occupied residence? ☐ Yes ☐ No

Type of Construction: ☐ Wood Frame with Siding ☐ Wood Frame with Brick ☐ Masonry

☐ Other (describe) _____

☐ Please attach a floor plan showing rooms labeled with square footage, use and (for classrooms) ages of children

3. OPERATIONAL INFORMATION

Number of Clients _____ Age Range of Clients _____ Number of Employees _____

Hours of Operation: Mon _____ Tue _____ Wed _____ Thu _____

Fri _____ Sat _____ Sun _____

4. LICENSING

Name of State Licensing Agency _____